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Colleen J. Dew

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group Art Unit 2822

OFFICIAL

<u>In re application of</u>	:	February 6, 2004
Axel Brintzinger et al.	:	Examiner: Monica Lewis
Serial No. : 09/873,537	:	
Filed: June 4, 2001	:	IBM Corporation
Title: DUAL DAMASCENE ANTI-FUSE	:	Dept. 18G/Bldg, 300-482
WITH VIA BEFORE WIRE	:	2070 Route 52
	:	Hopewell Junction, NY
	:	12533-6531

Amendment

Commissioner for Patents
Alexandria, VA 22313-1450

Sir:

The following amendment is submitted in response to the office action dated November 6, 2003.

The Amendment to the claims begin on page 2 of this paper.

Remarks begin on page 5 of this paper.

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Re Applic of	Axel Britzinger et al.
Docket No.	FIS920000011US2
Serial No.	09/873,537
Filing Date	June 4, 2001
Attorney	Steven Capella

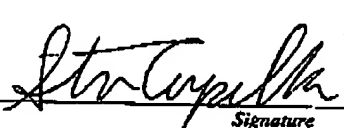
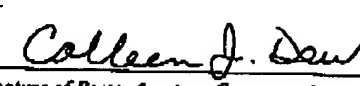
Attached: AMENDMENT

PLEASE DELIVER TO:

EXAMINER: Monica Lewis
ART UNIT:
FAX NO: 703-872-9306
PHONE NO:

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INTERNATIONAL BUSINESS
MACHINES CORPORATIONIntellectual Property Law
East Fishkill Facility
2070 Route 52
Hopewell Junction
New York 12533-6531Fax: 845-892-6363
Phone: 845-894-3669

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. FIS920000011US2	
Serial No. 09/873,537	Filing Date June 4, 2001	Examiner Monica Lewis	Group Art Unit 2822		
Invention: DUAL DAMASCENCE ANTI-FUSE WITH VIA BEFORE WIRE					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	9 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0458 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ Signature			Dated: February 6, 2004		
Steven Capella, Registration No. 33,086 International Business Machines Corporation 2070 Route 52 Hopewell Junction, NY 12533 845-894-3669					
<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being faxed on 02/06/2004 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p style="text-align: center;"> Signature of Person Faxing Correspondence</p><p style="text-align: center;">Colleen J. Dew Typed or Printed Name of Person Faxing Correspondence</p></div>					
cc:					